Case 7:10-cv-00163-GEC-mfu Document 4 Filed 04/20/10 Page 1 of 10 Pageid#: 15

IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF VIRGINIA ROANOKE DIVISION

Plaintiff,
v. Civil Action No. 7:10-Cu-00163
M. Stanford S. Roberts, medical department Defendant(s).
VERIFIED STATEMENT
I, the plaintiff in this action, have been advised of the requirements regarding exhaustion of administrative remedies as outlined in 42 U.S.C. 1997e and now submit this verified statement.
(Choose only one):
I have exhausted my administrative remedies as to each of the claims raised in my complaint by appealing my claims to the highest available level of the administrative remedies procedures. Copies of the record of the proceedings are attached to this statement.
I have attempted to exhaust my administrative remedies but my grievance was rejected as untimely. I have appealed that determination to the highest level available. I have attached documentation verifying my attempts to exhaust administrative remedies.
There are no administrative remedies available to me at this time, either because the issue I raise is nongrievable, or because there is no grievance procedure at the correctional facility at which I am confined. I have attached documentation verifying my attempts to exhaust administrative remedies.
This cause of action arose at, and I am now being housed at another facility, Therefore, I do no believe I have administrative remedies available at this time.
I affirm that I am the plaintiff in this action and I know the content of the above statement; that it is true of my own knowledge, except as to those matters that are stated in it to be based on my own information and belief; and to those matters, I also believe them to be true. I declare under penalty of perjury that the foregoing is true and correct
DATE SIGNATURE OF AFFIANT

^{*}An inmate who has been transferred from one VDOC prison facility to another may still be able to file grievances where the cause of action arose.



Effective Date: July 1, 2005 Operating Procedure# 866 Attachment #2

REGULAR GRIEVANCE FORM

630-10-12g Log Number 000 3

NGAL	JAMES	1180278	A)	144
Last Name	First	Number	Building	Cell Number
WHAT IS YOUR (was done OR attac	COMPLAINT? (Provide informath in the complaint if implement in the complaint if implement in the complaint if implement in the complaint in th	ation from the informal production Memorandum requi	cess: who did you see, whe	n did you see them, what
	was refused my medi		· .	
hight then his a	on emergery quievance em	he would not give m	coop. That date of	ficez collins
was in A Ald	BECAUSE he was with th	e nuese. Lt mullins	stated I was in th	E por Socializary.
I was in the s	dower when the nurse and	ed. I had to get ou	t of the shower and go	to my cell to get
	ex. By that time the muse			
when they come	during and FEC they should ,	m sloped fant backsribau	pay be on the phones of	2 in the shower.
If medical had	on set time in every pod for	Medication to be presed	out for ex 8 om + 1	Ipm then this would
· ·	they do not because the ov		•	
1 1	. life sustaining and ms	•		
dose whether	it was life threatening of signed the Emergency Grie want taken? Her lack of	n a touce at the son an	1856 mat a Ductor or a exima the 310, min did con	o specialist.
What action do you	want taken? Her lack of	penfessionalism by	nd beep the pation	t safe was not
Pegaraide.				
			DEGETTEN	
			MAR 3 1 2010	
		E	By	
Grievant's Signatu	re: Jan 20 9 Col # 1/80	278	Date: 3-/-/0	
Warden/Superinter	WRSP arievaries Department 3716Varies 2 2 2010	3 Ravine		
Date Received:	MAR 0 2 2010			



Effective Date: July 1, 2005 Operating Procedure# 866 Attachment #2

INSTRUCTIONS FOR FILING: You are required per Division Operating Procedure 866 "Inmate Grievance Procedure" to attempt to resolve your complaint in good faith prior to filing a regular grievance. The institutional Implementation Memorandum 866 details the informal process to use. You must submit your grievance within 30 days from the date of occurrence or discovery of incident. Only one issue per grievance will be addressed. Write your issue only in the space provided on the grievance form, preferably in ink. Regular grievances are submitted through the institutional mail to the Warden/Superintendent's office and a receipt issued within 2 working days from received date if the grievance is not returned during intake.

INTAKE:	Grievances should be accepted for logging unless returned for the following reason(s):
	Non-Grievable. This issue has been defined as non-grievable in accordance with Division Operating Procedure 866.
	Disciplinary Procedure. You may appeal hearing decisions, penalties, and/or procedural errors under the provisions
	in Division Operating Procedure 861, "Inmate Discipline".
	Matters beyond the control of the Department of Corrections
	Validation decisions rendered by the Security Threat Group Program Manager
	Does not affect you personally
	Limited. You have been limited by the Warden/Superintendent
	More than one issue – resubmit with only one issue
	Expired Filing Period. Grievances are to be filed within 30 calendar days from date of occurrence/incident, or discovery of the
	occurrence/incident except in instances: 1) beyond the inmate's control or, 2) where a more restrictive time frame has been
	established in Division procedures to prevent loss of remedy or the issue from becoming moot.
	Repetitive. This issue has been grieved previously in grievance #
	Inquiry on behalf of other inmates.
	Group Complaints or Petitions. Grievances are to be submitted by individuals.
<u>. </u>	Vulgar/Insolent or Threatening Language. YOU MAY BE CHARGED IN ACCORDANCE WITH THE PROVISIONS IN DIVISION OPERATING PROCEDURE 861 "INMATE DISCIPLINE"
	Photocopy/Carbon Copy. You must submit the original grievance for responses and appeals.
	Grievances Filed Regarding Another Institution. This grievance is being returned to you for you to submit to:
	<u> </u>
1	Informal Procedure. You have not used the informal process to <u>resolve</u> your complaint in accordance with the Implementation Memorandum
	Request for services
	Insufficient Information. You need to provide the following information to the Grievance Office before the grievance can be
	processed:
	The issue in the grievance is different from the issue in the informal complaint
	1 Ombudaman (Griavana Coordinator & Carry WRSP
Institutiona	d Ombudsman/Grievance Coordinator: Ginavance Department
If you disa	gree with this decision, you have 5 calendar days from date of receipt to submit to the Richoral Ophilidsman for a
review of t	he intake decision. The Regional Ombudsman's decision is final.
Regional R	eview of Intake (within 5 working days of receipt)
	The intake decision is being upheld in accordance with the criteria in Division Operating Procedure 866 "Inmate Grievance
	Procedure".
	The intake decision is being returned to you because the 5 day time limit for review has been exceeded.
	The grievances meet the criteria for intake and are being returned to the Warden/Superintendent for logging.
Regional O	mbudsman: Date:
WITHDRA	AWAL OF GRIEVANCE: I wish to voluntarily withdraw this grievance. I understand that by withdrawing this grievance,
there will be	e no further action on this issue nor will I be able to file any other grievance in the future on this issue.
T	
Inmate Sign	nature: Date:
CI4- CC 33774	
Staff Witne	ss: Date:

look of the person who squed this exictions

VIRGINIA DEPARTMENT OF CORRECTIONS

DOP 866 Attachment 5

EMERGENCY GRIEVANCE FORM

83942 Log# Definition: Emergencies are defined as situations or conditions which may subject the inmate to immediate risk of serious personal injury or irreparable harm. 1180278 Cell# **Inmate Last Name** No. Institution/Bldg. # PART A- INMATE CLAIM What is the emergency? I was Befused my Mech When pill call was Announced there she was leaving. I SV STAIDING Merlicas 2-16-10 Date / Time PART B- STAFF RESPONSE (This part is to be completed and returned to the inmate within eight (8) hours.) Your grievance does not meet the definition for an emergency. Reason/s: Your grievance has been determined to be an emergency and the following action has been taken: Ш 35 $\circ \alpha$ Date / Time Respondent / Title

Distribution: Original Grievance returned to Inmate

Copy forwarded to Institutional Ombudsman/Grievance Coordinator

[Detach here]

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VIRGINIA DEPARTMENT OF CORRECTIONS

866.1 A-7

DOC Location: Central Office,

Administration

Report Generated by Ray, Howard Report run on 4/2/2010 at 12:01 PM

Offender Grievance Response - Level II

Offender Name	DOC#	Location		Grievance Number
Neal, James W Jr.	1180278	Current	Wallens Ridge State Prison	630-10-REG-00013
		Filed	Wallens Ridge State Prison	
LEVEL II: REGIONAL	DIRECTOR, HI	EALTH SERVICE	S DIRECTOR OR CHIEF OF O	PERATIONS FOR
OFFENDER MANAGI	EMENT SERVIC	ES RESPONSE	(To be completed and mailed with	hin 20 calendar davs)

OFFENDER MANAGEMENT SERVICES RESPONSE (To be completed and mailed within 20 calendar days) Your grievance appeal complaint has been reviewed along with the response from Level I and your complaint that on February 16, 2010, the nurse refused you your life sustaining medication. You said that it was reported that you were socializing and did not report to receive your medication. You said that you were in the shower.

Based on the information provided and upon further investigation, I concur with the Level I response and have determined your grievance UNFOUNDED. Per Lt. A. Mullins, it was noted that you were seen in the pod socializing with other offenders and would not get in the pill line to receive your medication. You refuse you medication when you fail to present at the pill call line in a timely manner. This issue is governed by OP 701.1.

If you have any further issues, please resubmit a sick call for further evaluation. There is no violation of policy/procedure regarding this issue. No further action is needed from this level.

this issue. No further action is needed from this level.	
Level II is the last level of appeal for this grievance	
	04/02/2010
Regional Director, Health Services Director, or Chief of Operations for Offender Management Services	Date

Jan Hut 1180278

sound to see and some or and above and the first Appeal to the Level I Response: (CARDAN Copied) PG1

1) In the informal complaint that i wrote which is Attached to this QRIEVANCE. LT. A. mullins states that officer collins was not working A-Building on the date of 3-16-10. When I submitted the Regular grievance and Attached the Emergency grievance to it. I told the GRIEVANCE COORDINATOR to look At the Emergency GRIEVANCE BECEIPT WHERE THE OFFICER SIGNS. They would SEE that Office ? collins had indeed worked A. Building Because he was the one who signed the emergency grievance. In the wardens Besponse, LT. A. millsin Response had changed. LT. A. mullins stated officers collins was working A-Building. Which is not what was said on the informal Complaint.

8.) NUBSE Roberts Arrived in A-1 pool during pod Recerption and pill call was announced. I was in the shower when this was done. There's not that many inmates who take medications in this pad. I had to day off, put my clothes on. Their put to the hold to day off, put my cell. Whit for my cell door to be opered. The Booth Willer World they cell door Because he thought? wanted to come in the copy. I had to get my I.d. And Some water. Then I had to push the emergency button in my cell. Wait for the officer to Answer it And tell him i had to get my medication. I was seen by nurse Roberts coming down the Steps, She was closing when medical Box and walking out the door. I let her know that 9 needed my medication. She could have Stopped and gave me my medication because she's done it top other in mates Betole. Nurse Roberts refused to stop

Date 3.29-10 (CC)

Cont.....

Pg &

OR SPEAK to ME. At that time i told office collins that i wanted

An Emergency grievance. I was sent to my cell as if i had done

Something wrong. I was denied the Emergency grievance by officer

collins and the Booth officer. I had to get an inmate who an pod worker

to get the emergency grevance for me, incl take it to get signed.

Officer collins would going to sign it, then inmate had to talk to him

to make him sign it.

3.) There is no set time here on W.B.S. F for pill calls. There is no timely manner inwhich to come to the pill line since there is no set time for pill call. There's no rule here at W.B.S. P that States you have I minute or 20' minutes to get in line and get your medications. If there was a set time limit then this Response could have Been used.

4) Lt. K. Schobohm has nothing to do profite property department here
At U.B.S.P. He was sent to speak to premi strength should this
matter. Lt. schobohm told me he dight know why the Asist. Warden
had him investagating to issue because it was an esue for medical.
If anything it should have been turned over to the institutional
Investigators or the medical departments higher ups to Be Answerd.

5) Chronic CARE medications ARE considered to Be life sustains medications. An (RN) Such AS Duzse Roberts cannot Refuse to give your, your medications if you ask for them. Specially if its chronic care medication.

(cc)

Continu

Ms. Roberts can't refuse to give me my medications the consult with an cloctor after she made the decision not to give it to me. It shows that nurse roberts intentionally did not give me my medication and spoke with the doctor it she indeed did speak with him right then. The emergency grievance was answered at sizopm. The cloctor would have been gone by then. In the response on the informal complaint. Nothing was said about ms roberts speaking with the doctor. It shates ms roberts said its not life systaining to miss one close of my medications. Again ms roberts can't make that call. She has no way of knowing. By saying she spoke with the clouder it shows she was trying to cover herself in case she had clone sanething wrong. It shows malice on the Part of ms roberts and the medical department here on write. Chronic care patients take medications that heep them living, without them they most likely would die. So an (RN), he ms roberts can't just up and not give

DECEDVE

MAR 3 1 2010

Jan Hac # 1/80278

A PERSON there medication. MS Roberts is not qualified to make that desision.

Date 3-89-10

OFFENDER GRIEVANCE RESPONSE LEVEL I

Neal, James		1180278	WRSP	630-10-Reg-00013
Offender Name		Number	Facility	Log Number
				mailed within 30 calendar days.)
				our life sustaining medication. You
		socializing and di	d not report to receive	your medication. You said that you
were in the sho	wer.			
T. A. 3.6.44		11.000.100		
				he date indicated Officer Collins was
			the pod socializing wil	th other offenders and would not get
in the pill line t	to receive your medication	on.		,
Investigation in	diagted that non It V	Cahlahahm yay	rafizad varu madiaatia	n whom won foiled to manage of the
_			•	n when you failed to present at the to determine if a specific medication
	g. It is your responsibili			
is fife sustaining	g. It is your responsion	ty to be cooperan	ve and compry with yo	ur plan of care.
OP 701 1 – He	alth Services Administra	ntion governs this	issue	
		60 . 61110	15540.	
After reviewing	g the information presen	ted by staff in res	ponse to your complain	nt, and the policy governing the issue,
	vance to be Unfounded	•	r	, I , ,
, ,		-		
If you are dissa	tisfied with the Level I i	response, you ma	y appeal within five (5)	calendar days to: The Director of
-	, P. O. 26963, Richmond		•	·
	Daylordo			26.212
	Bryan Watson, War	<u></u>		3/25710
	Bryan Watson, War	den		Date
T	1 th a I arral I magness as he			
i wish to appea	l the Level I response be	ecause:		
		. 1		
				
		a NH	DEDE	
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	Slast 110 - ma			0.00.15
Jan 2	1160a10			3-29-18
	Offender Signatu	re		Date

VIRGINIA DEPARTMENT OF CORRECTIONS
Informal Complaint

FEB 1 / ZUIU

Effective Date: November 1, 2007
Operating Procedure #866.1 Attachment #9

Informal Complaint

INSTRUCTIONS FOR FILING: Briefly write your issue in the space provided on the Informal Complaint form, preferably in ink. Only one issue per Informal Complaint. Place your complaint in the designated area at your facility. A receipt is issued within 2 working days from the date received if the informal complaint is not returned during intake. If no response is received within 15 calendar days, you may proceed in filing a regular grievance. You may utilize your receipt as evidence of your attempt to resolve your complaint.

James Neal	196547/1180278	A1-144
Offender Name	Offender Number	Housing Assignment
Unit Manager/Supervisor	Food Service	Treatment Program Supervisor
Personal Property Medical Administrator	☐ Commissary ☐ Other (Please Specify):	Mailroom
iviedicai Administrator	Other (Flease Specify): _	
Briefly explain the nature of your con	mplaint (be specific):	and the second of the second o
I had a situation on	2-16-10 during eveni	ra pill, where The nurse
Refused to give me my m	redication. So i Asked	officer Collins And the
control from officer too	an emergency Grieva	nce and was depical this
		ncy was life threating
because my medication		
3	10 000000000000000000000000000000000000	20 31.27.21.29 7 32.703 110.2.
0 4 4	6 10 01	
Offender Signature	<i>1180378</i>) Da	ite 3-16-10
Offe	nders - Do Not Write Below T	his Line
Date Received: 02-17-10	<u> </u>	Tracking # _/0 6/0
Date Received: 02-17-10 Response Due: 03-04-10	Assigned to	Tracking # 10610 : LT. MULLINS
	Assigned to	
Response Due: 03-04-03	Assigned to	
Response Due: 03-04-03		above Officie
Response Due: 03-04-03	indicated.	above Officie
Response Due: 03-04-03	indicated.	above Officie
Response Due: 03-04-03	indicated.	above Officie
Response Due: 03-04-03	indicated.	above Officie
Response Due: 03-04-03	indicated.	above Officie
Response Due: 03-04-03	indicated.	DECLE OFFICIAL STATES OF MAN STATES OF MAN STATES OF SELECTION OF SELE
Response Due: 03-04-03	indicated not assign that yel a pool soci s and w fine to be is not lip	DECLE OFFICIAL STATES OF MAN STATES OF MAN STATES OF SELECTION OF SELE
Response Due: 03-04-Co Action Taken/Response: Of the date Collins was It is noted plea in the Other Offender in the pill Midde of inx.	indicated not assign that you a pool soci s and w fine to be is not lip e.	ELT. MULLINS BLOVE Officer Sol to A Bldy. X Sold With Star get Cleve your ests, mich def. Le sustaining &
Response Due: 03-04-Co Action Taken/Response: Of the date Collins was It is noted plea in the Other Offender in the pill Midde of inx.	indicated not assign that yel a pool soci s and w fine to be is not lip	ELT. MULLINS Blove Officer ed to A Bldg. A Bl

Original - Offender

First Copy – File

Second Copy - Offender as Intake Receipt